For Official Use	
Visa No.	
Type of Visa	
Date of Issue	
Charges	
Signature of Issuing Officer	

Application for Ghana Entry Permit/Visa WASHINGTON MISSION

INSTRUCTIONS

- This form must be completed in Quadruplicate and in Capital Letters and submitted (together with Four (4) recent Passport-size pictures) within at least three (3) days before the intended date of departure.
- 2. Full names and Addresses of references in Ghana should be stated (including Telephone Number, if available).
- 3.

	Any Appi	information stated on the Form and subsequen icants applying by post should provide Self-Ad	tly f	ound to be incorrect may render Entry Permit/Visa void. sed stamped envelopes.	
1.	(a)	Surname		First Name(s)	
	(b)	Date of Birth	(c)	Place of Birth	
	(d)	Nationality	(e)	Former Nationality (if any)	
				Date of Issue	
	(h)	Place of Issue	(i)	Date of Expiry	
2.	Pro	fession/Occupation			
3.		Business Address & Tel. No.			
	(b)	Residential Address & Tel. No.			
4.	Pro				
5.		Travelling by: Air Sea Land			
	(b)	Is applicant in possession of return ticket?		Ticket No.	
	(c)	Financial means at Applicant's disposal			
6.	Pu	rpose of Journey: Business Tourism		Employment Official	
7.	Na	ames & Addresses of two References in Ghana:			
		(i)			
	. If for Employment, Name & Address of Employer in Ghana				
9	Di	uration of Stay in Ghana			
10	. Da	ate of Last Visit to Ghana			
11	. A	oplicant's Signature		Date of Application	